Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate	te level produced by rate revision
effective April 1, 2010	

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Auto	mobile Liability Private	voidino (minolo)	
	senger		
	mercial		
	mobile Physical Damag		
	ate Passenger		•
	mercial		
	ility Other Than Auto	430,435	-9.9
	lary and Theft		
Glas	•		
Fidel			
Sure	•		
	er and Machinery	**************************************	
Fire	and madriniory		
	nded Coverage		
	id Marine		
	eowners		
	mercial Multi-Peril	· · · · · · · · · · · · · · · · · · ·	
Crop			
Othe			
Oung	Life of Insurance		
Doe	s filing only apply to cer	tain territory (territories) or	certain
Clas	sses? If so,		
spec	cify: No		
-			
Brie	f description of filing. (If	f filing follows rates of an a	dvisory
	anization, specify		
orga	anization):	Adopt ISO's revised loss	costs and revise our loss cost
multip	olier		
	usted to reflect all prior		
		mium level which will resu	alt from application of new
rate	S.		
		AXA Insurance Co	
			me of Company
		· · · · · · · · · · · · · · · · · · ·	stant Vice President
		(Official – Title

Form (RF-3)

SUMMARY SHEET

Change in Company's prem	ium or rate level produced by rate revision effective
November 1, 2009	

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+ or -) **
1.	Automobile Liability		
	Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$ 320,192	-0.2%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$2,150,962	-1.0%
10.	Extended Coverage	\$ 822,157	-0.9%
11.	Inland Marine		
12.	Homeowners	\$1,268,132	-1.2%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	s filing only apply to certain territory	(territories) or certain classe	s? If so, specify:
Vo			

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

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SEP 0 2 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Foremost Insurance Company
Grand Rapids, Michigan
Name of Company

David J. Kelly
Assistant Vice-President
State Filings

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Cha	ange in Company's premium or rate lev	el produced by rate revision effective	10/15/2009
	(1)	(2) Annual Premium	/ / (3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	163,576	12%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
	Inland Marine		
	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
	Other		•
	Line of Insurance		
Doe No	es filing only apply to certain territory (to	erritories) or certain classes? If so, specif	y:
Brie ISO		ates of an advisory organization, specify of the fetroleum	
	justed to reflect all prior rate changes. hange in Company's premium level wh	ich will result from application of new rate	s.

Soyd Class AVP-State / ling,
Official - Title

Change in Company's premiurevision effective 1/1/201	m or rate level produced b	by rate
(1)	(2) Annual Premium	(3) Percent
Coverage	<pre>Volume (Illinois)*</pre>	Change (+ or -)**
Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	\$431,731	+11.0%
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain		
If so, specify:		
Brief description of filing. (If organization, specify organization	filing follows rates of a	n advisory s increasing base
liability rates by 12.5%. The rates for		
being changed. The eligibility for the to allow for gross receipts up to \$40	e Business Activities endorse	
* Adjusted to reflect all prior r		

- * Adjı
- ** Change in Company's premium level which will result from application of new rates.

Grinnell Mutual Reinsurance Company
Name of Company
Derek Settergren - Assistant Actuary
Official - Title

H29219D

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium	or rate lev	vel produced b	by rate revision
effective 04/01/2010	•		

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
^	Commercial		
2	Automobile Physical Damag Private Passenger		•
	Commercial		
3.	Liability Other Than Auto	\$7,310	-4.0%
4.	Burglary and Theft		
5.	Glass		
6 .	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail	***************************************	
15.	Other		
	Life of Insurance		
*	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: NO		
	Brief description of filing. (If f Organization, specify organization):		dvisory
	LCM will remain as filed.	71000110110110000	35. IIII. 9 C 2 2 5 5 2 2 1 1 1 1 1 1 5 5 5
	COM Will Formally do Miod.		
	*Adjusted to reflect all prior ra **Change in Company's premates.		It from application of new
	10.00.	Harco National Ins	surance Company
		······································	me of Company
		Kim Schmidt, Com	
			Official – Title

(Change in Company's premium or rate	level produced by rate revision effective	April 1, 2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	NCC - \$239,000	-4.0
4.	Burglary and Theft	1100 ψ237,000	
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		M
11.	Inland Marine		******
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
13.	Line of Insurance		
Does f	iling only apply to certain territory (ter	rritories) or certain classes? If so, specify:	
* A	description of filing. (If filing follows of ISO filing GL-2009-BGL1 djusted to reflect all prior rate changes hange in Company's premium level who sult from application of new rates.		
		Nation	nal Casualty Company

Dawn Gormley - Filings Analyst I
Official - Title

Name of Company



SEP 2 4 2009

Form (RF-3) DEPARTMENT OF INSURANCE SPRINGFIELD, ILLINOIS

SUMMARY SHEET

	SPRINGFIELD, ILLINOIS	S	
	Change in Company's premium or rat	e level produced by rate revision effective	04/01/2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
_	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$101,561	-10.5%
4.	Burglary and Theft	\$101,501	-10.370
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	- Control - Cont	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (to	erritories) or certain classes? If so, specify:	
Ado		s rates of an advisory organization, specify of ity Loss Costs as referenced in ISO I	
** C	djusted to reflect all prior rate change hange in Company's premium level w sult from application of new rates.	s. hich will	

National Interstate Insurance Company Name of Company

Kathy Juhasz, Regulatory Compliance Specialist

Official - Title

Priv Cor 2. Auto Priv Cor 3. Liab	Coverage mobile Liability vate Passenger nmercial mobile Physical Damage vate Passenger nmercial	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
Priv Cor 2. Auto Priv Cor 3. Liab	vate Passenger nmercial mobile Physical Damage vate Passenger		
2. Auto Priv Con 3. Liab	mobile Physical Damage vate Passenger		
3. Liab	inneretai		
	lity Other Than Auto	SIN - \$103,000	-4.0
	lary and Theft		
5. Glas	•		
6. Fidel			
7. Sure	•		
	er and Machinery		
9. Fire	······································		
	nded Coverage		
	d Marine		
12. Hom	eowners		
13. Com	mercial Multi-Peril		
14. Crop	Hail		
15. Othe			
	Line of Insurance		
Does filing or No	aly apply to certain territory (territories) or certain classes? If so, specify:	

Change in Company's premium level which will result from application of new rates.

Scottsdale Indemnity Company Name of Company

Dawn Gormley - Filings Analyst I
Official - Title

	, , ,	April 1, 2010	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3. 4. 5. 6.	Liability Other Than Auto Burglary and Theft Glass Fidelity	\$353,605	-4.0%
0. 7.	Surety	Lore Martin	
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance	<u> </u>	
	s Filing only apply to certain territory ses? If so, specify:	y (territories) or certain	
	f description of filing. (If filing follow inization, specify organization):	Adoption of ISO's Revised Comm	
		Advisory Prospective Loss Costs	Revision
	 * Adjusted to reflect all prior rate ch * Change in Company's premium le result from application of new rate 	evel which will	,
		Seneca Insurance Compa	ny
			Name of Company

Kevin Purcell - VP IRC, LLC
Official - Title

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$462,940 (CAP - Prof Liab)	0%
4.	Burglary and Theft	φ10235 10 (CA11 1.01 E.do)	
5.	Glass		
6.	Fidelity		ECEIVED
7.	Surety		CEIVED
8.	Boiler and Machinery		EO.
9.	Fire		
10.	Extended Coverage		2009
11.	Inland Marine		SEP 0 8 2009
12.	Homeowners		STATE OF ILLINOIS STATE OF ILLINOIS
13.	Commercial Multi-Peril		TATE OF ILLINGURANCE
14.	Crop Hail		STMENT OF IELD
15.	Other	D	STATE OF ILLINOIS STATE OF INSURANCE EPARTMENT OF INSURANCE SPRINGFIELD
	Line of Insurance		
		erritories) or certain classes? If so, specify ociation - Professional Liability product - T	
		s rates of an advisory organization, specify Table 1 rates for 1000+ units based on co	
** C	djusted to reflect all prior rate change hange in Company's premium level w sult from application of new rates.		

United States Liability Ins. Co.
Name of Company

Mark Miller, State Filings Manager
Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

LOB:	Commercial Mulit-Peril	
Change in Company's premium or rate lev	vel produced by rate revision effective	01/01/2010
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage Private Passenger		
Commercial 3. Liability Other Than Auto 4. Burglary and Theft	384,155	-46.6%
5. Glass 6. Fidelity 7. Surety		
8. Boiler and Machinery 9. Fire	882,294	-37.6%
0. Extended Coverage		
Inland Marine		
2. Homeowners		
3. Commercial Multi-Peril		
4. Crop Hail		
5. Workers Compensation		
6. Other Line of Insurance		
loes filing only apply to certain territory (territ	ories) or certain classes? If so, specify: N/A	
	s of an advisory organization, specify organiz reakdown and Auto Physical Damage Exte	
* Adjusted to reflect all prior rate changes. ** Change in Company's premium level which	ch will result from application of new rates.	
	Universal Underwriters Insu	rance Company
	Name of Compa	ny
	Patricia E. Chudik/Regulatory	Services Analyst
	Official - Title	